



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY

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HAWAII

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STATE OF HAWAII
STATE ETHICS COMMISSION
LOBBYIST REGISTRATION FORM
(Type or Print Clearly)

PART I LOBBYIST

NAME (Last)	(First)	(Middle)	TELEPHONE
Ida	Glenn	Seichi	295-1280
MAILING ADDRESS (Street)			FAX
45-284 Pahikawa St.			
(City)	(State)	(Zip Code)	
Kaneohe	Hi.	96744	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
(City)	(State)	(Zip Code)	

PART II ORGANIZATION

NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	TELEPHONE	
Hawaii Teamsters and Allied Workers, Local 996	847-6633	
MAILING ADDRESS (Street)	FAX	
1817 Hart St.	842-4575	
(City)	(State)	(Zip Code)
Honolulu	Hawaii	96819-3205
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Brad McDaniel		847-6633
MAILING ADDRESS (Street)		FAX
1817 Hart Street		842-4575
(City)	(State)	(Zip Code)
Honolulu	Hi.	96819-3205

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

- | | | | |
|--|--|---|--|
| <input checked="" type="checkbox"/> Agriculture | <input checked="" type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input checked="" type="checkbox"/> Communications & Public Utilities | <input checked="" type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input checked="" type="checkbox"/> Tourism & Recreation |
| <input type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input checked="" type="checkbox"/> Labor & Employment | <input checked="" type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input checked="" type="checkbox"/> Health | <input checked="" type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
| <input checked="" type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | _____ |

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

Dean S. Ida

(Signature of Lobbyist)

3-09-07

(Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
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Ronan Kozuma

President

NAME OF ORGANIZATION (if applicable)

Hawaii Teamsters and Allied Workers, Local 996

TELEPHONE

847-6633

MAILING ADDRESS (Street)

1817 Hart Street

FAX

842-4575

(City)

Honolulu

(State)

Hi.

(Zip Code)

96819-3205

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

Ronan Kozuma

(Signature of Authorizing Officer or Person Represented)

3-09-07

(Date)